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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number Application Number 10/591049 May 5, 2008 Filing Date POWER OF ATTORNEY OR First Named Inventor Jeffrey STROVEL **REVOCATION OF POWER OF ATTORNEY DETERMINING CANCER-LINKED GENES** WITH A NEW POWER OF ATTORNEY AND THERAPEUTIC TARGETS USING Title MOLECULAR CYTOGENETIC METHODS AND Art Unit 1634 CHANGE OF CORRESPONDENCE ADDRESS Examiner Neme Carla J. Myers Attorney Docket No. 118553-01001 I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney Is submitted herewith. I hereby appoint Practitioner(s) aesociated with the following Customer X Number as my/our attorney(s) or agent(e) to prosacute the epplication 86738 Identified above, and to transact all business in the United States Petent end Tredemark Office connected therewith: I hereby appoint Practitioner(s) nemed below as my/our ettorney(s) or agent(s) to prosecute the epplication identified above, and to transact ell business in the United States Patent and Tradamark Office connected therewith: Registration Registration Number Neme Neme Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: The address associated with Customer Number: 86738 OR Firm or Individual Name Address City Zip Stete Country Telephone Email I am the: Applicant/Inventor. Assignee of record of the entire Interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on SIGNATURE of Applicant or Assignee of Record Signature Date Sept 2010 Name Caesar J. Belbel Telephone 617-527-9933 Title and Company | Executive Vice President and Chief Legal Officer - Avalon Pharmaceuticals NOTE: Signatures of all the inventors or assignees of record of the antire interest or their rapresentative(s) are required. Submit multiple forms if more than one signature is required, see below*.

forms are submitted.

*Total of